



ITZ

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) BENNER-1
In re Application of <b>Brenner</b>		
Application Number <b>10/820,207</b>	Filed <b>04/08/2004</b>	
For <b>CONFINEMENT FENCE STRUCTURE FOR CLIMBING ANIMALS</b>		
Group Art Unit <b>3679</b>	Examiner <b>M. P. Ferguson</b>	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ \_\_\_\_\_
  - ☒ Two months (37 CFR 1.17(a)(2)) \$ 450
  - ☐ Three months (37 CFR 1.17(a)(3)) \$ \_\_\_\_\_
  - ☐ Four months (37 CFR 1.17(a)(4)) \$ \_\_\_\_\_
  - ☐ Five months (37 CFR 1.17(a)(5)) \$ \_\_\_\_\_
  - ☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 225
  - ☒ A check in the amount of the fee is enclosed.
  - ☐ Payment by credit card. Form PTO-2038 is attached.
  - ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
  - ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1954.
- I have enclosed a duplicate copy of this sheet.

- I am the ☐ applicant/inventor
- ☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ attorney or agent of record.
- ☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

05/29/2006  
Date

Signature

Eric A. LaMorte  
Typed or printed name

05/05/2006 CCHAU1 00000044 10620207  
01 FC6632 225.00 CP

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/820,207
Filing Date	04/08/2004
First Named Inventor	Benner
Group Art Unit	3679
Examiner Name	M. P. Ferguson
Attorney Docket Number	Benner-1

Total Number of Pages in This Submission

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div>Remarks</div>		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	LaMorte & Associates
Signature	
Date	05/29/2006

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 05/29/2006			
Typed or printed name	Eric A. LaMorte		
Signature		Date	05/29/2006